# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

FACILITY: LOCATION: MAILING ADDRESS: PERMITTEE NAME: COUNTY Mid/Coast Aggregates, LLC Formally Florida Mining Corporation 7000 State Road 50 Sumter Webster, FL 33597 Webster, FL 33597 7000 State Road 50 Mazak Limerock Mine LIMIT: CLASS SIZE: PERMIT NUMBER MONITORING PERIOD NO DISCHARGE FROM SITE: MONITORING GROUP NUMBER MONITORING GROUP DESC From: × D-001 FL0322890 Minor Final 1/1/2006 REPORT To 1/31/2006 Industrial Monthly

Parameter		Quantity of	Quantity or Loading	Units	Qua	Quality or Concentration	ation	Units	Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement								0		
PARM Code 50050 1  Mon. Site No. FLW-1	Permit Requirement	3.7 (Mo.Avg.)	Report (Max.)	MGD					0	Continuou	Calculated
рН	Sample Measurement								C		
PARM Code 00400 1  Mon. Site No. EFF-1	Permit Requirement					6.0 (Min.)	8.5 (Max)	SU	0	Monthly	Grab
Turbidity	Sample Measurement							, which			
PARM Code 00070 1 Mon. Site No. EFF-1	Permit Requirement						(Max.)	Nic	0	Monthly	Grab
Specific Conductance	Sample Measurement									X	
PARM Code 00095 1 Mon. Site No. EFF-1	Permit Requirement						(Max.)	CM	0	Monthly	Grab
Chloride (as Cl)	Sample Measurement						5		0	No.	
PARM Code 00940 1	Permit Requirement						(Max.)	MG/L	o	Monusy	Urao

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT SIGN	IGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGE	TELEPHONE NO	DAIE
Patricia Snowdon, Sr. Environmental Scientist	Joseph Mary Royal Company of the Com	(352) 636-0704 2006/2/13	2006/2/13

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Mid/Coast Aggregates, LLC Formally Florida Mining Corporation

PERMIT NUMBER: FL0322890

MONITORING GROUP NUMBER: D-001

MONITORING PERIOD From:

1/01/2006

/2006 To

To 1/31/2006

Measur Permit Require Sample Measur	Mes Pen Req	Mea				PARM Code 00900 1 Permit	Hardness, Total (as CaCO3) Sample Measure				Lead Total Recoverable (effluent Sample	*	,	ble (calculated)	Mon. Site No. EFF-1 Requ	PARM Code 01114 1 Permit	Lead, 10tal Recoverable (ethiueni) Sample Measure			Aluminum, Total Recoverable Sample Measure			erable		PARM Code 00945 1 Permit			PARM Code 00951 1 Permit	Fluoride, Total (as F)  Sample  Massure	Parameter	
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# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

Patricia Snowdon, Sr. Environmental Scientist	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible to gauncing and imprisonment for knowing violations and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.  THE EDITIONS NO. DATE.	**ENTER NODI=9 IN THE RESULTS COLUMN IF NO DISCHARGE OCCURRED DURING THIS REPORTING PERIOD.  ENTER NODI=9 IN THE RESULTS COLUMN IF NO DEFINITIVE TESTS ARE REQUIRED.  I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information, the information submitted is to the best of my known that the information is to the best of my known that th	*IF A SECOND DEF							PARM Code TANGH Q	LC50 STATRE 96HOUR ACUTE Cyprinella leedsi (Additional)	Mon. Site No.	Cyprinella leedsi (Koutine)	LC50 STATRE 96HOUR ACUTE	Mon Site No.	IDDA	LC50 STATRE 96HOUR ACUTE	PARM Code TAN3B P Mon Site No.	Ceriodaphnia dubia (Routine)	TOSS STATES SCHOOLS ACTO	Parameter		COUNTY: Sun	FACILITY: Max LOCATION: 700 We	MAILING ADDRESS: Wel	
Sr. Environme	, EXECUTIVE OFFICER O	ed on my inquiry of the pers implete. I am aware that the	IN THE RESULTS COLUN IN THE RESULTS COLUN at this document and all atta	Requirement TEST IS REQUI	Measurement	Sample	Requirement	Measurement	Sample	Requirement	Permit	TE Sample Measurement	Requirement	Permit		Requirement			Permit Requirement		1			Sumter	Mazak Limerock Mine 7000 State Road 50 Webster, FL 33597	Webster, FL 33597	VCoast Aggregates, LLC F
ntal Scientist	OR AUTHORIZED S	on or persons who manage the sere are significant penalties for s	**ENTER NODI=9 IN THE RESULTS COLUMN IF NO DISCHARGE OCCURRED DURING THIS REPORTING PERIOD ENTER NODI=9 IN THE RESULTS COLUMN IF NO DEFINITIVE TESTS ARE REQUIRED.  der penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that this document and all attachments were prepared under my direction or supervision in accordance with a secondary of law that the s	Requirement  REST IS REQUIRED, ENTER THE RESULT IN AN EMPTY ROW																		Quantity or Loading					Mid/Coast Aggregates, LLC Formally Florida Mining Corporation
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

# DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400 PERMITTEE NAME: Mid/Coast Aggregates, LLC Formally Florida Mining Corporation PERMIT NUMBER FL0322890

MAILING ADDRESS LOCATION FACILITY 7000 State Road 50 7000 State Road 50 Mazak Limerock Mine Webster, FL 33597 LIMIT MONITORING GROUP NUMBER MONITORING GROUP DESC CLASS SIZE: D-002 Final Minor

> GROUP: REPORT

Industrial Monthly

NO DISCHARGE FROM SITE: S-4 (Tributary ditch)

MONITORING PERIOD

From:

1/01/2006

To

1/31/2006

COUNTY:

Sumter

Webster, FL 33597

pH Mon. Site No. FLW-2 PARM Code 50050 1 Flow PARM Code 00070 Mon. Site No. EFF-2 Specific Conductance Mon. Site No. EFF-2 Mon. Site No. EFF-2 PARM Code 00400 Chloride (as CI) PARM Code 00095 Mon. Site No. EFF-2 PARM Code 00940 Parameter Permit Sample Sample Permit Measurement Sample Requirement Permit Measurement Requirement Sample Requirement Requirement Permit Measurement Requirement Measurement Measurement Permit (Mo.Avg.) 0.736 Quantity or Loading (Max.) 1.393 Units MGD MGD Quality or Concentration (Min.) 6.0 7.8 (Max.) (Max.) (Max. (Max.) 4.36 432 8.5 29 8.4 CM CM UMHO/ Units MG/L MG/L DIN DIN US SU No. Ex 0 0 0 0 0 0 0 0 0 0 Frequency of Analysis Continuous Continuous Monthly Monthly Monthly Monthly Monthly Monthly Monthly Monthly Calculated Calculated Sample Type Grab Grab Grab Grab Grab Grab Grab Grab

true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief,

Patricia Snowdon, Sr. Environmental Scientist	NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
(352)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
(352) 636-0704	TELEPHONE
2006/2/13	NO DATE

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

## DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Mid/Coast Aggregates, LLC Formally Florida Mining Corporation

PERMIT NUMBER: FL0322890

MONITORING GROUP NUMBER: D-002

MONITORING PERIOD

1 /01/20

From:

900
1
1/31/2

				Mon Sic No. Dil-2	PARM Code 00900 1	Hardness, Total (as CaCO3)	1850	PARM Code 01114 O	Lead, Total Recoverable (effluent minus the calculated)	10000	PARM Code 01114 P	Lead, Total Recoverable (calculated)	Mon. Site No. EFF-2		Lead, Total Recoverable (effluent)	PARM Code 01104 1 Mon. Site No. EFF-2	Aluminum, Total Recoverable	Mon. Site No. EFF-2	PARM Code 00923 1	Sodium, Total Recoverable	Mon. Site No. EFF-2	Sulfate, Total	Mon. Site No. EFF-Z	PARM Code 00951 1	Fluoride, Total (as F)	Parameter
Permit	Sample Measurement	Permit Requirement	Measurement	Comple	Permit	Sample Measurement	Requirement	Permit	Sample Measurement	Requirement	Permit	Sample	Requirement	Measurement	Sample	Permit Requirement	Sample Measurement	Requirement	Permit	Sample Measurement	Requirement	Measurement	Nequirement	Permit	Sample Measurement	
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## INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

The DMR consists of four parts—A, B, C, and D—all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part C is only applicable for domestic wastewater facilities with limited wet weather discharges permitted under Chapter 62-610 860, F.A.C. Part D is used for reporting ground water monitoring

Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be typed or printed in ink

In addition to filling in numerical results on various parts of the DMR, the following codes should be used and an explanation provided where appropriate. Note: Codes used by the lab for raw data may be different

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Flood disaster.
IFS	Insufficient flow for sampling.
LS	Lost sample.
MNR	Monitoring not required this period.

SEF	HTO	OPS	NOD	CODE
Sampling equipment failure.	Other. Please enter an explanation of why monitoring data were not available.	Operations were shutdown so no sample could be taken.	No discharge from/to site.	DESCRIPTION/INSTRUCTIONS

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used:

- Results greater than or equal to the PQL shall be reported as the measured quantity
- Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and
- w Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one half the MDL or half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation. when determining compliance with permit limits.

### PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.) Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following blanks in the header should be completed by the permittee or authorized representative

No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number. If there was no discharge of effluent for a particular outfall, reuse, or land application system and the DMR monitoring group includes other monitoring locations (e.g., influent sampling); the "NOD" code should be used to individually denote those parameters for which there was no discharge.

number in the header. Enter the data or calculated results for each parameter on this row. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed

No. Ex.: Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter. If none, enter zero

Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the

Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in may be reached in the event there are

questions concerning this report. Enter the date when the report is signed Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

#### PART B - DAILY SAMPLE RESULTS

Month/Year: Enter the month and year during which the data on this report were collected and analyzed

Three-month Average Daily Flow: Calculate and enter the three-month average daily flow to the treatment facility.

(TMADF/Permitted Capacity) x 100: Divide the three-month average daily flow by the permitted capacity of the treatment facility, multiply by 100, and enter this value.

Daily Monitoring Results: Record the results of daily monitoring for the parameters required to be sampled by your permit. Record the data in the units indicated

Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary

Type of Effluent Disposal or Reclaimed Water Reuse: Enter the type of effluent disposal or reclaimed water reuse (e.g. surface water discharge, ocean outfall, slow rate land application-public access, slow rate land application-

restricted public access, rapid rate land application, absorption field, underground injection).

discharge during the reporting month, check 'Yes' and attach PART C - LIMITED WET WEATHER DISCHARGE. Limited Wet Weather Discharge Activated: If this plant does not have a limited wet weather discharge permitted under the provision of Rule 62-610.860, F.A.C., check 'Not Applicable.' If the plant activated the wet weather

### PART C - LIMITED WET WEATHER DISCHARGE

submitted. All information is to be provided for each day on which the limited wet weather discharge was activated This part is to be completed and submitted each month reclaimed water or effluent is discharged by a limited wet weather discharge permitted under Rule 62-610 860, F.A.C. For months with no discharge, Part C need not be

Month/Year: Enter the month and year during which the data on this report were collected and analyzed

rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data. Rainfall Information: Enter the name and location of the rainfall gauging station, the source of climatological (normal rainfall) data, the cumulative rainfall for the average rainfall year, and the cumulative rainfall to date for this The cumulative rainfall for the average rainfall year is the amount of rain, in inches, which falls during an average rainfall year from January through the month for which this part contains data

Date: Enter the date on which the discharge occurred.

Gallons Discharged: Enter the quantity in millions of gallons of reclaimed water discharged during the period shown in duration of discharge. Show the units as millions of gallons (mg), accurate to the nearest 0.01 Duration of Discharge: Enter the number of hours, to the nearest 0.1 of an hour (0.1 hr. = 6 min.) during each day of discharge that reclaimed water was actually discharged to surface waters

measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit Average Discharge Flow Rate: Divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD). Average Upstream Flow Rate: Enter the average flow rate in the receiving stream upstream from the point of discharge for the period shown in duration of discharge. The average flow rate can be calculated based on two

Stream Dilution Factor: Enter the actual stream dilution ratio accurate to the nearest 0.1. To calculate the factor, divide the average upstream flow rate by the average discharge flow rate

CBOD; Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

Total P: Enter the cumulative number of days since January 1 of the current year during which the limited wet weather discharge was activated divided by the total number of days since January 1 of the current year multiplied by

Reason for Discharge: Provide a brief explanation of the factors contributing to the need to activate the limited wet weather discharge

### PART D - GROUND WATER MONITORING REPORT

Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling. Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.

Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N) Sampling Methods: Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)

Preservatives Added: State what preservatives were added to the sample.

Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources

Analysis Result/Units: Record the results of the analysis. If the result was below the minimum detection limit, indicate that. Enter the units associated with the results of the analysis.

Detection Limits/Units: Record the detection limits of the analytical methods used and the units associated with them.

Comments and Explanations: Use this space to make any comments on or explanations of results which are unexpected. If more space is needed, reference all attachments in this area